

# DEFENSIVE ACTION CENTER, LLC

## RANGE RULES AND LIABILITY RELEASE

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DRIVER LICENSE: \_\_\_\_\_ CONCEALED PISTOL LIC: Y \_\_\_ N \_\_\_

EMERGENCY CONTACT: \_\_\_\_\_

RELATION: \_\_\_\_\_ PHONE: \_\_\_\_\_

### PLEASE READ THE FOLLOWING AND ANSWER "YES" OR "NO"

\_\_\_ Are you under 18 years of age? If yes, you must be under the direct supervision of your parent, other relative, or legal guardian, or other adult approved by the parent or guardian. Written permission may be required.

\_\_\_ Are you a fugitive from justice?

\_\_\_ Are you an unlawful user of, or addicted to, marijuana or any depressant, stimulant or narcotic drugs or any other controlled substance?

\_\_\_ Have you been convicted in any court of a crime punishable by imprisonment for term exceeding one year, even if you were given a shorter sentence?

\_\_\_ Have you been adjudicated mentally defective or committed to a mental institution?

\_\_\_ Have you been convicted in any court of a misdemeanor crime of domestic violence?

\_\_\_ Are you subject to a court order restraining you from harassing, stalking or threatening an intimate partner or child of such partner?

### RANGE RULES (INITIAL EACH RULE)

\_\_\_\_\_ No live ammunition, blades, impact weapons, propellants, or tasers permitted on range facilities.

\_\_\_\_\_ Eye protection must be worn upon entering range facilities

\_\_\_\_\_ Personal Protective Equipment (PPE) must be worn during all scenarios

\_\_\_\_\_ All participants will complete three (3) safety checks for prohibited items before any scenario begins

\_\_\_\_\_ Upon completion of scenarios, all converted firearms must be cleared and returned to range master.

\_\_\_\_\_ DAC employees, Range master or range safety officer (RSO) have total authority regarding range operations and policies. Any commands from any one of them must be followed.

\_\_\_\_\_ I have read and understand all range rules.

# DEFENSIVE ACTION CENTER, LLC

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I agree that I will assume full responsibility for any and all injuries, losses, or damages which occur to me, my family, my guests, and any personal property while on the premises of Defensive Action Center, LLC, and to the maximum extent allowed by law I agree to release, indemnify, and hold harmless Defensive Action Center, LLC or any employee from any liability whatsoever for injuries, losses or damages. I agree that I will indemnify and hold harmless, to the maximum extent allowed by law, from costs (including legal fees), injuries, damages, losses, or liability to third parties for claims or other shooters, while on the Defensive Action Center, LLC premises.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Employee Initial \_\_\_\_\_

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I consent to being photographed and/or video recorded while participating in training at Defensive Action Center, LLC. I understand these photos and/or videos may be used in promotional material on Defensive Action Center, LLC's website and social media. Yes \_\_\_\_\_ No \_\_\_\_\_

Social Media accounts I would like to be tagged/mentioned (optional):

Account/Name: \_\_\_\_\_

Social Media Platform(s): \_\_\_\_\_

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If I am signing for a minor: By signing in the space provided below, I also agree to RELEASE, HOLD HARMLESS AND INDEMNIFY the Defensive Action Center, LLC, the manufacturers and distributors of firearms, ammunition and accessories and their owner, agents and employees for any claims of the minor. I agree to be responsible for any medical expenses incurred by the minor using these facilities.

Minor(s) Name: \_\_\_\_\_

Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

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